

AMENDMENT TRANSMITTAL LETTERDocket No.
HOI-14302/16Application No.
10/560,519-Conf. #5664Filing Date
March 20, 2006Examiner
M. C. HenryArt Unit
1623

Applicant(s): Inge Dorthe Hansen

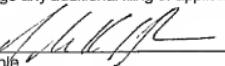
Invention: TREATMENT OF SYMPTOMS ASSOCIATED WITH BACTERIAL VAGINOSIS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	32	- 32 =	0	x 26.00	0.00
Independent Claims	3	- 4 =	0	x 110.00	0.00
Multiple Dependent Claims (check if applicable)					<input type="checkbox"/>
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

 Large Entity Small Entity No additional fee is required for this amendment. Please charge Deposit Account No. _____ in the amount of \$ _____. A check in the amount of \$ _____ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge and credit Deposit Account No. 07-1180 as described below. A duplicate copy of this sheet is enclosed. Credit any overpayment. Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
Julie K. Staple

Attorney/Agent Reg. No.: 50,434

Dated: June 17, 2011

GIFFORD, KRASS, SPRINKLE, ANDERSON & CITKOWSKI, P.C.
2701 Troy Center Drive, Suite 330

Post Office Box 7021

Troy, Michigan 48007-7021

(734) 913-9300